

Wolitski RJ, for the Project START Study Group. Project START reduces HIV risk among prisoners after release. XV International Conference on AIDS; July 11–16, 2004; Bangkok, Thailand. Abstract WeOrC1296.

**Background:** HIV, sexually transmitted infections (STIs), and hepatitis are more prevalent among prisoners than in the general US population. This affects the health of 1.3 million men in US prisons and the communities where they return. Incarceration presents an opportunity to implement prevention programs, but there are few evidence-based interventions for incarcerated men.

**Methods:** Young men (18-29 years of age) were recruited from prisons in 4 US states and systematically assigned to a pre-release single-session intervention (SSI) or an enhanced intervention (EI). The EI consisted of 2 pre-release sessions, 4 post-release sessions (delivered over 12 weeks), and optional sessions based on participant need. Both interventions addressed HIV, STIs, and hepatitis; the EI also addressed re-entry issues (e.g., housing, employment). Interviews were conducted prior to intervention, and at 1 week, 12 weeks, and 24 weeks after release. A logistic mixed model controlling for site, time in community, and pre-incarceration behavior assessed intervention effects at 12 and 24 weeks.

**Results:** 522 men ( $M$  age = 23 years,  $SD$  = 2.7) were included in the intent-to-treat analysis. Follow-up rates ranged from 79% to 86%. Unprotected vaginal/anal sex during the 90 days prior to incarceration was reported by 86% of men in the EI and 89% in the SSI (OR = 0.78, 95%CI = 0.46, 1.32). At follow-up, unprotected vaginal/anal sex was not significantly different before all EI sessions were delivered (69% EI vs 77%, SSI at 12 weeks, OR = 0.55, CI = 0.26, 1.16), but was significant at 24 weeks (68% EI vs 78% SSI, OR = 0.40, CI = 0.18, 0.87). No significant site difference in treatment effect was observed.

**Conclusions:** Project START demonstrates the feasibility of a multi-session intervention that bridges incarceration and re-entry into the community. The EI led to a significant reduction in unprotected vaginal/anal sex among male prisoners, protecting them and their partners from HIV and STIs.